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## \*\* CONTINUING DATA \*\*\*\*\*

*None**DR*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None**DR*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Met after Allowance	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature <i>Debra J. Dickey</i>	Initials <i>DR</i>	7	20	3

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## TITLE

Method and system for forming source regions in memory devices

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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